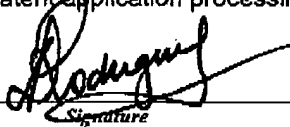


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 08CL5989-2
Applicant(s): Gohr et al.			
Serial No. 09/749,645	Filing Date December 27, 2000	Examiner Peter A. Szekely	Group Art Unit 1714
Invention: Method for Reducing Haze in a Fire Resistant Polycarbonate Composition			OFFICIAL FAX RECEIVED MAR 13 2003 GROUP 1700
I hereby certify that this <u>Response to Office Action, Amendment Transmittal, Cert. of Trans. by Facsimile</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(703) 872-9310</u>) on <u>March 13, 2003.</u> (Date)			
<u>Connie Wussow</u> (Typed or Printed Name of Person Signing Certificate) <u>Connie Wussow</u> (Signature)			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 8CL5989-2	
Applicant(s): Gohr et al.					
Serial No. 09/749,645	Filing Date December 27, 2000	Examiner Peter A. Szekely		Group Art Unit 1714	
Invention: Method for Reducing Haze in a Fire Resistant Polycarbonate Composition					
OFFICIAL					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
GROUP 1700					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	16 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-0862 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ <i>Signature</i>				Dated: March 13, 2003	
David E. Rodrigues Registration No. 50,604 Telephone No. (860) 286-2929					
I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.					
Signature of Person Mailing Correspondence					
Typed or Printed Name of Person Mailing Correspondence					
CC:					